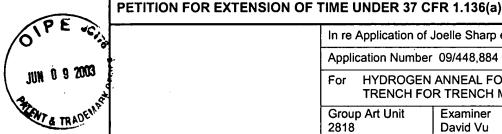
Docket Number (Optional) 018865-003600US

Under the Paperwork Reducti



Appli	cation Numbe	er 09/448,884	Filed	November 24, 1999
For		N ANNEAL FOR OR TRENCH MC		NG AN ENHANCED
Grou 2818	p Art Unit	Examiner David Vu		

he requested extension and appropriate non-small-entity fee are as follows check time period desired): One month (37 CFR 1.17(a)(1)) Two months (37 CFR 1.17(a)(2)) Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4)) Five months (37 CFR 1.17(a)(5)) Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet. am the paplicant/inventor. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or agent of record.	For HYDROGEN ANNEAL FOR CREATING AN ENHANCED TRENCH FOR TRENCH HOSFETS Group Art Unit Examiner David Vu si is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a yin the above identified application. requested extension and appropriate non-small-entity fee are as follows sect time period desired): One month (37 CFR 1.17(a)(1)) \$ Two months (37 CFR 1.17(a)(2)) \$ Three months (37 CFR 1.17(a)(4)) \$ Five months (37 CFR 1.17(a)(4)) \$ Five months (37 CFR 1.17(a)(5)) \$ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet. If the applicant/inventor. alsignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). ARNING: Information on this form may become public. Credit card information should not lincluded on this form. Provide credit card information and authorization on PTO-2038. June 4, 2003 Date ARNING: Information on this form may become public. Credit card information should not lincluded on this form. Provide credit card information and authorization on PTO-2038. Typed or printed name		In the Application of a	Joene Chaip et a	•	
TRENCH FOR TRENCH MOSFETS Group Art Unit 2818 Examiner David Vu This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a sply in the above identified application. The requested extension and appropriate non-small-entity fee are as follows theck time period desired): One month (37 CFR 1.17(a)(1)) Two months (37 CFR 1.17(a)(2)) Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4)) Five months (37 CFR 1.17(a)(5)) Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account. A check in the amount of the fee is any the fee is	yn the above identified application. requested extension and appropriate non-small-entity fee are as follows sek time period desired): One month (37 CFR 1.17(a)(1))		Application Number	09/448,884	Filed November	
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	June 4, 2003 Date Barmak Sani, Reg. No. 45,068 Typed or printed name ignatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple more than one signature is required, see below*.	ply in the above identified application requested extension and approheck time period desired): One month (37 CFR Two months (37 CFR Three months (37 CFR Four months (37 CFR Five months (37 CFR Applicant claims small entite above is reduced by one-head A check in the amount of the Payment by credit card. For the Commissioner has alread application to a Deposit Act The Commissioner is hered or credit any overpayment I have enclosed a duplicate me the applicant/inventor. assignee of record of the Statement under 37 attorney or agent under attorney or agent under	ation. opriate non-small-ention R 1.17(a)(1)) R 1.17(a)(2)) CFR 1.17(a)(3)) R 1.17(a)(4)) R 1.17(a)(5)) Sy status. See 37 CFF alf, and the resulting fine fee is enclosed. Form PTO-2038 is attacted and been authorized account. Sy authorized to charge, to Deposit Account Recopy of this sheet. The entire interest. See CFR 3.73(b) is enclosed. T 37 CFR 1.34(a).	ty fee are as follows: R 1.27. Therefore fee is: \$	\$ \$ \$93 \$ \$, the fee amount sharthis a may be required,	0 nown
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Barmak Sani, Reg. No. 45,068	nore than one signature is required, see below*.	Signatures of all the inventors or assigne	es of record of the entire inte	erest or their represen	tative(s) are required. S	ubmit multiple
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Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. PA 3309531 v1

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